

DECLARATION FOR PATENT APPLICATION

Docket Number PEST-P01-002

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

SYSTEMS AND METHODS FOR MANAGING CONTACT INFORMATION

the specification of which (check one)

(X) is attached hereto.

() was filed on {Date} as United States Application Number or PCT International Application Number _____.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulation, § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, § 119(a)-(d) of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

Prior Foreign Application(s)	Priority Claimed
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<u>(Number)</u>	<u>(Country)</u>	<u>(Day/Month/Year Filed)</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No
<u>(Number)</u>	<u>(Country)</u>	<u>(Day/Month/Year Filed)</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No

I hereby claim the benefit under Title 35, United States Code, § 119(e) of any United States Provisional application(s) listed below.

<u>60/214,602</u> (Application Number)	<u>June 27, 2000</u> (Day/Month/Year Filed)
<u>(Application Number)</u>	<u>(Day/Month/Year Filed)</u>

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, § 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

<u>(Application Number)</u>	<u>(Day/Month/Year Filed)</u>	<u>(Status: patented, pending, abandoned)</u>
<u>(Application Number)</u>	<u>(Day/Month/Year Filed)</u>	<u>(Status: patented, pending, abandoned)</u>

I hereby appoint Madeline Baer, Reg. No.: 36,437; Steven Baughman, Reg. No.: P-47,414; Johnny Y. Chen, Reg. No.: 46,614; Gregory J. Glover, Reg. No.: 34,173; William G. Gosz, Reg. No. 27,787; Patricia Granahan, Reg. No.: 32,227; David P. Halstead, Reg. No.: 44,735; Daniel Hansburg, Reg. No.: 36,156; Edward J. Kelly, Reg. No.: 38,936; Robert A. Mazzarese, Reg. No.: 42,852; Colleen H. McDuffie, Reg. No.: 43,788; Wolfgang Stutius, Reg. No. 40,256; Matthew P. Vincent, Reg. No.: 36,709 as attorneys/agents to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full name of sole or first inventor (given name, family name): Andre Morkel

Inventor's signature: _____ Date: _____

Residence: 44 Paulina Street, Apt. 2, Somerville, MA 02444 Citizenship: Australia

Post Office Address: same as above

Full name of second joint inventor, if any (given name, family name): _____

Inventor's signature: _____ Date: _____

Residence: _____ Citizenship: _____

Post Office Address: same as above

Full name of third joint inventor, if any (given name, family name): _____

Inventor's signature: _____ Date: _____

Residence: _____ Citizenship: _____

Post Office Address: same as above

Full name of fourth joint inventor, if any (given name, family name): _____

Inventor's signature: _____ Date: _____

Residence: _____ Citizenship: _____

Post Office Address: same as above

Full name of fifth joint inventor, if any (given name, family name): _____

Inventor's signature: _____ Date: _____

Residence: _____ Citizenship: _____

Post Office Address: same as above

() Additional inventors are being named on separately numbered sheets attached hereto.